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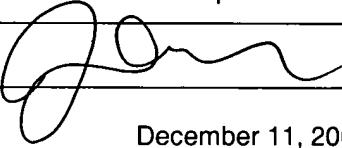
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Request for Customer Number (PTO/SB/125) submitted herewith.

**in the following listed application(s) or patent(s):**

Patent Number (if appropriate)	Application Number	Patent Date (if appropriate)	U.S. Filing Date
	09/826,833		April 6, 2001

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Typed or Printed Name	Joseph A. Rhoa	(check one)
Signature		<input type="checkbox"/> Applicant or Patentee
Date	December 11, 2002	<input type="checkbox"/> Assignee of record of the entire interest. Statement under 37 C.F.R. § 3.73(b) is enclosed. (Form PTO/SB/96)
Address of signer:	1100 North Glebe Road, 8 <sup>th</sup> Floor Arlington, VA 22202	<input checked="" type="checkbox"/> Attorney or Agent of record

37,515  
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of **1** forms are submitted.

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